# BROOME COUNTY YOUTH PREVENTION PARTNERSHIP

State Incentive Cooperative Agreement (SICA) Project

Comprising the School Districts of:
Binghamton City
Johnson City
Maine-Endwell
Union-Endicott

# **BROOME COUNTY PARENT PERSPECTIVES**

Arthur R. Johnson, CSW, Commissioner

Prepared for the Broome County Partnership by the Binghamton University (SUNY) Evaluation Team: Karen Ryabchenko, MA James MacKillop, BA Meredith Cochran, MA

Stephen A. Lisman, PhD

Project Coordinator: Terry Cole, CSW, CASAC

Broome County Mental Health Department One Hawley Street, Binghamton NY 13901

# Table of Contents

Introduction	3
Method	3
Proviso	5
Aggregate Parental Opinions and Difference by Age	7
Conclusions	14
Parental Opinions Compared to Youth Reports	16
Conclusions	18
Parent Opinions by School District	19
Binghamton City School District	19
Johnson City School District	22
Maine-Endwell Central School District	27
Union-Endicott Central School District	30
General Conclusions	34
References	39
Appendices	40

#### Introduction

The Broome County Youth Prevention Partnership (BCYPP) is a coalition of community organizations that is funded by the New York State Office of Alcoholism and Substance Abuse Services State Incentive Cooperative Agreement (SICA) to coordinate the implementation of research-based substance abuse prevention programming using the Communities That Care®(CTC) model. The CTC model provides a methodological framework designed to guide community prevention planning and programming. CTC provides a procedure for the identification of empirically derived risk and protective factors for substance abuse within a given community. CTC provides a method for selecting and implementing research-based prevention programs associated with those factors. CTC also stresses quantitative assessment for identifying risk/protective factors and the impact of the program.

The BCYPP conducted a multifaceted needs assessment that incorporated CTC student self-report surveys as well as independent evaluations through student focus groups and parent surveys. The purpose of the independent needs assessments were to provide qualitative and quantitative data that may be unique to the Broome County community in order to inform and guide future community programming decisions. This following report is the BCYPP Parent Survey Report.

#### Method

The BCYPP Parent Survey was based on the model used by the Saratoga Partnership for Prevention, another SICA funded CTC implementation. The questions comprising the survey were derived directly from the CTC Youth Survey, allowing the data collected to complement the youth findings. The principal difference between the

BYCPP Parent Survey and the Saratoga Parent Survey is that surveys were mailed to parents in Broome County, whereas the Saratoga Partnership for Prevention telephoned parents to collect data.

A total of 3,792 parent surveys were mailed to parents of middle school and high school students in the Binghamton City, Johnson City, Maine-Endwell and Union-Endicott school districts. The number of parents required for the desired statistical analyses was determined by conducting a power analysis, or a test to see how many individual data points would be necessary to yield significant differences between groups based on an estimate of difference magnitude and by estimating a 33% return rate. Simply put, we used a standard technique to find out how many responses would be necessary to make our findings statistically meaningful. Appendix A presents the statistical calculations that led to our estimate that 1240 returned surveys would be sufficient data for calculating descriptive statistics and possibly allow comparisons between groups. Based on this analysis and the predicted return rate, a total of 3,792 randomly selected parents were mailed surveys with stamped, addressed envelopes for easy reply. For three of the four school districts an equal number of surveys were mailed per grade level. In the case of the Binghamton City School District, surveys were similarly distributed on the high school level and because there are two middle schools in this district, surveys were sent to parents of 7<sup>th</sup> graders in one district middle school, and parents of 8<sup>th</sup> graders in the other middle school.

In addition, the Binghamton University Translation Center translated the parent surveys into the four most prevalent languages spoken in Broome County other than English, as reported by the four school representatives on the Broome County Youth

Prevention Partnership Community Board: Spanish, Vietnamese, Russian, and Bosnian. These surveys were mailed to parents of English as a Second Language (ESL) students in their native language based on the relative number of ESL students in a given district and applicability of the selected languages.

Of the 3972 randomly selected parents who received the parent survey, 1064 parents (27%) completed and returned surveys in response to this mailing. The number of survey's returned varied by district, 181 of the parents (17%) of parents replied from the Johnson City school district, 283 parents (27%) returned surveys from Binghamton City, 326 parents (31%) from Union-Endicott, and 274 parents (26%) of parents replied from Maine-Endwell<sup>1</sup>.

The Information Specialists from the Binghamton University Evaluation Team analyzed the returned surveys by using Microsoft Excel and the Statistical Package for the Social Sciences (SPSS; Version 9.0).

#### Proviso

The data collected via parent surveys are subject to limitations; in particular, those of response bias. What this means is that it is not clear whether the parents who returned the survey (27%) were a random sample of the parents in Broome County, or if, more likely, there were systematic characteristics of respondents that biased the data. Specifically, it is at least possible, if not probable, that parents who are more involved and invested in their teen's life took the time and trouble to complete the BCYPP Parent Survey. Thus it is possible that responses might be significantly more positive than if a true random sample of Broome County parents filled out the survey.

<sup>&</sup>lt;sup>1</sup> As a function of the rounding process, the percentages reported may add to slightly above or below 100%.

A second similar limitation exists in terms of the content of responses. The questions on the BCYPP Parent Survey were relatively face-valid, or directly asked for the information that was important to the partnership with little effort at subtlety. As such, the "right", or "correct", or socially desirable answers are apparent. This sometimes fosters a bias in the respondent to reply in ways that meet with social approval regardless of whether their response accurately represents their true feelings or behavior.

As we discussed in an earlier report of the findings from the youth focus groups, it is worth keeping in mind that the larger the sample analyzed, the more confidence we can place in the conclusions. In the case of data drawn from individual school districts, the likelihood of an erroneous conclusion or generalization is therefore higher than for data that represents all four districts.

Two other points should also be made regarding the content of this report. First, due to the lack of district-specific data in the CTC Youth Survey Report, direct comparisons of student and parent answers on specific questions can only be made at the aggregate district level. Thus, it should also be kept in mind that this is a comparison of a large majority of all students in Broome County, compared to a sample of parents, 27% of whom chose to return the survey. As such, the previously mentioned limitations apply to this also.

Second, although this project is referred to as a parent survey, a small and significant group of respondents including grandparents and other guardians were expected to respond in the role of the primary caregiver for the target child. The different characteristics of the custodians responding are noted in both aggregate and district-

specific sections. Nonetheless, due to the huge majority of parents responding and for increased readability the terms "parent" and "child" will be used.

# Parent Surveys: Aggregate Data for Broome County and Differences Across Age Groups

Responses from the parents in all four school districts were combined to examine patterns in overall responding. Subsequent analysis by grade level was accomplished by constructing three groups: middle school (i.e., 7<sup>th</sup> and 8<sup>th</sup> grades), early high school (9<sup>th</sup> and 10<sup>th</sup> grades), and late high school (11<sup>th</sup> and 12<sup>th</sup> grades).

Demographic and child characteristics were collected across the four school districts. On an aggregate level, 98% of the respondents were parents, 1% of the respondents were grandparents and 1% of the respondents were legal guardians. Most parents reported that their child's ethnicity was White (93%). A few parents reported another ethnicity for their child, including African-American (1%), Hispanic (1%), Native American (1%), and Asian/Pacific Islander (2%). Parents indicated that primary language spoken at home was English (96%), however, Russian (2%), Vietnamese (1%), Bosnian (1%) and Spanish (<1%) were also reported. The average age of the children from all four school districts was 15, with an average age of 13, 15, 17, for the combined middle school, early high school, and late high school groups respectively. Seventy-seven per cent of the parents who responded to the survey reported that their child's grades were high (i.e., 80% or higher). Specifically, the reports of child grade performance fell into the following ranges: 90-100 (43%), 80-89 (34%), 70-79 (17%), 65-69 (4%), and below 65 (2%). (See Table 1)

The parent surveys assessed parental attitudes towards their child's potential use of substances and their evaluation of the risk for harm associated with substance use. Most parents (87%) endorsed opposition to substance use prior to age 21. However, attitudes towards alcohol use differed from attitudes towards any other type of substance use. In reference to alcohol use, across grade levels, most parents (63%) reported that it would be acceptable for their child to drink alcohol "At age 21", while some parents (24%) indicated that their child should "Never" drink alcohol. Fewer parents endorsed that it was acceptable for their child to drink before age 21, in "Supervised" (7%) or "Responsible" (6%) use. (See Table 2) However, with respect to alcohol use by grade level, the parents of the late high school students were more permissive than were the parents of younger children. For example, 18% of the parents of late high school students said that it was acceptable for their child to drink before age 21 in "Supervised" or "Responsible" situations compared to 11% and 12% of the middle school and early high school parents respectively. (See Tables 26, 10, 18)

Parental attitudes were clearly less tolerant of substance use other than alcohol. Across school districts and grade levels a majority of the parents responded that there was no acceptable age for any other substance use (tobacco, 90%; marijuana, 96%; and "Other Drugs", 99%). Only 8% of parents responded that tobacco was acceptable at age 21 and 3% of the parents said the same about marijuana. (See Table 2) Interestingly, there were differences in the extent to which parent attitudes relaxed across grade levels. For example, 7% of the parents of the late high school children endorsed that it was acceptable for their child to use marijuana either after age 21 or before with either supervised or responsible use. (See Table 26) Fewer parents of middle school children

(2%) and early high school children (4%) endorsed any acceptability of marijuana use. (See Tables 18, 10) Overall, parents indicated that they were opposed to their child using any substances other than alcohol and most parents were opposed to alcohol use prior to age 21.

Similar to parental attitudes regarding alcohol use, most parents perceived that there would be a "Great" (70%) or "Moderate" (27%) risk for harm associated with alcohol use for individuals under 21-years of age. Likewise, many parents rated marijuana use (81%), tobacco use (89%) and other drug use (97%) as a "Great" risk for harm. Of the parents who did not endorse that substances other than alcohol were associated with a "Great" risk for harm, 15% of the parents endorsed that marijuana use and 10% endorsed that tobacco use had an associated "Moderate" risk for harm. Very few parents (1%) responded that there was "No risk" for alcohol, tobacco and marijuana use, and less than 1% of the parents reported that they perceived "No risk" associated with cigarette and other substance use. (See Table 3) Overall, the parents from all four school districts reported knowledge of a risk for harm associated with substance use in children.

Again, a trend appeared across grade levels in which more late high school parents endorsed only a moderate risk for harm in terms of alcohol and marijuana use compared to middle school and early high school parents. Specifically, more parents of the oldest group of children perceived only a moderate risk for harm for marijuana (19%) and alcohol (32%) use compared to the middle school (12% and 26%) and early high school parents (14% and 23%). (See Tables 27, 11, 19)

The parent survey assessed the extent to which parents viewed themselves as being aware of their child's behavior. Most parents across districts and grade levels reported high levels of awareness, indicating that they would either "Most likely" or "Definitely" know whether their child engaged in deviant or delinquent behavior related to substance use and truancy. Specifically, 95% of parents reported that they would either "Most likely" or "Definitely" know whether their child did not come home on time. The same likelihood was reported by 84% of parents as to whether they would know if their child carried a handgun, by 85% of the parents in reference to truancy and by 78% of parents in terms of drinking alcohol without their permission. The rest of the parents endorsed that it was only "Somewhat likely" or "Not likely" that they would know about these behaviors. Nearly 19% of the parents said that it was "Somewhat likely" that they would know whether their child drank alcohol, whereas 12% of the parents endorsed the same likelihood of knowing whether their child skipped school. Likewise a smaller proportion of the parents indicated that it was either unlikely (9%) or "Somewhat likely" (7%) that they would know whether their child carried a handgun. (See Table 4)

In terms of differences in responding among parents of middle school, early high school and late high school students, middle school parents endorsed higher levels of awareness of their child's behavior compared to high school parents. This may reflect a greater degree of independence allowed to high school children. Fifty three percent of the middle school parents indicated that they would be "Definitely likely" to know whether their child skipped school compared to 40% of the early high school parents and 36% of the late high school parents. Similarly, 57% of the middle school parents reported that they would "Definitely" be aware of their child carrying a handgun to school

compared to 48% of the early high school parents and 43% of the late high school parents. Finally, 77% of the middle school parents compared to 68% of the early high school parents and 63% of the late high school parents said that they would "Definitely" know whether their child was home on time (See Tables 12, 20, 28).

Family interactions and the degree to which parents were involved with their child's life were assessed. Overall, parents reported positive family environments and high levels of participation in their child's school and recreational activities. For example, most parents (91%) indicated that they "Usually" or "Always" ask their child what they think before making a decision that will affect the child. Likewise many parents (95%) reported praising their child by indicating that they are proud of him or her. In terms of interest and involvement in their child's affairs, most parents (96%) reported that they "Usually" or "Always" know where their child is when the child is not at home and that they (97%) ask their child to call when they will be late. Furthermore, 91% of parents reported asking their child about his/her homework, and 81% reported attending a recreational activity with their child. (See Table 5)

Across age groups the greatest trend for reduced involvement was evident in the extent to which parents ask their children about their homework. For example, 82% of the middle school parents reported "Always" asking their child whether he or she completed homework, whereas 67% and 48% of the early high school and late high school parents respectively reported "Always" asking about homework. Likewise, 81% of the middle school parents reported "Always" being aware of their child's whereabouts, compared to 66% of the early high school parents and 50% of the late high school

parents. (See Tables 13, 21, 29) Overall, parents reported less involvement with older children compared to younger children.

In terms of parent-child interactions or family dynamics, most of the parents reported minimum levels of discord. Over 96% of the parents endorsed that they "Occasionally" or "Never" have serious arguments or insult/yell at each other and 95% indicated that they only "Occasionally" or "Never" continually argued about the same issues. Parental responses as to the frequency that their child attends a religious service or activity were more divided: 55% answered either "Usually" or "Always", 32% answered "Occasionally" and 13% answered "Never". (See Table 5) These responses reflected parents who are more knowledgeable about and involved in their children's activities at younger ages and somewhat less involved at older ages. Overall, most of the parents who responded to the survey reported positive family interactions.

Consistent with reports of being involved with their child and positive family dynamics, the parents' responses suggested that they held strong beliefs and values in regard to deviant behaviors. Nearly all of the parents reported that it would be "Very Wrong" for their child to engage in deviant behavior including drinking alcohol regularly (93%), smoking cigarettes (91%), or marijuana (94%), stealing anything worth more than \$5 (99%), picking a fight with someone (85%), and drawing graffiti (95%). Furthermore, the majority of all other responses fell in the category of "Wrong". All of the parents endorsed that the regular use of alcohol, tobacco or marijuana was at least somewhat wrong. (See Table 6)

Parental values were consistent across grade levels for stealing, picking a fight and drawing graffiti. However, parents' views of deviant behaviors related to substance

use varied according to grade. For example, 96% of the parents of middle school students compared to 93% of the parents of an early high school student and 89% of the parents of a late high school student endorsed that regular alcohol use was "Very Wrong". Moreover, 95% of the middle school parents compared to 91% of the early high school parents and 88% of the late high school parents indicated that smoking cigarettes regularly would be "Very Wrong". Similarly, 96% of the middle school and 95% of the early high school parents endorsed that smoking marijuana regularly would be "Very Wrong" compared to 91% of the late high school students. (See Tables 14, 22, 30)

Parents also were assessed in terms of their child's substance usage and whether their child had a substance use problem. The reports of child substance use corroborated previously mentioned values opposing substance use of any kind prior to adulthood and high levels of parental involvement in their child's activities. For example, most parents endorsed that their children either "Never" or only "Once or twice" had used substances. In particular, these responses were reported by most of the parents for alcohol (91%), tobacco (94%) and for "Other drugs" (98%). (See Table 7)

Consistent with these reports, a majority of the parents also indicated that they did not perceive any substance use to be a problem for their child. Most parents reported that their child did not have a problem with alcohol use (96%), tobacco use (93%) and "Other drug" use (96%). A few parents conveyed that their child had a problem with alcohol use (2%) and/or tobacco use (5%). A very small percentage of parents (2%) indicated that they did not know whether their child had a substance use problem for alcohol and/or other drugs. The extent to which alcohol, tobacco and other drug problems were underreported was not clear. In terms of family history of substance use problems, 31%

parents reported that someone in their family had a severe alcohol or drug problem. (See Table 8)

Parental reports of their child's substance use varied across grades. As expected, the younger children were less likely to have parental reports of regular substance usage. For example, 93% of the middle school parents compared to 70% of the early high school parents and 49% of the late high school parents reported that their child had "Never" used alcohol. Likewise, 6% of the middle school parents, 25% of the early high school parents and 32% of the late high school parents indicated that their child had used alcohol once or twice. Very few parents of the middle school students said that their child either "Occasionally" (1%) or "Frequently" (0%) used alcohol. Relatively few, but more of the early high school parents reported that their child used alcohol either "Occasionally" (5%) or "Frequently" (1%). Up to 18% of the late high school parents reported that there child used alcohol occasionally and 1% reported frequent use. (See Tables 15, 23, 31) More high school parents (7%) reported that their child had a problem with tobacco use compared to 2% of the middle school parents. More late high school parents reported that they did not know whether their child had an alcohol problem (4%) compared to 1% of the middle school and early high school parents. (See Tables 16, 24, 32)

#### Conclusions

Parent surveys in conjunction with student focus groups provide two forms of data collected by BCYPP that supplement the quantitative data provided by the CTC Youth Survey. This portion of the report summarizes the attitudes of parents from four school districts as a whole and according their child's grade level. The responses of the parents across school districts indicated that for the most part the parents held strong

beliefs and values in opposition to substance use by their child. Overall, parents were consistently opposed to substance use prior to age 21 and perceived at least moderate or great risks for harm associated with substance use. Parents across school districts also indicated that they were most likely to be aware of delinquent behavior on the part of their child and that they were highly involved in their child's activities. A much smaller percentage of the parents reported that they were not opposed to substance use prior to adulthood and likewise relatively few indicated that they would not be aware of their child's behavior or that they were not especially involved in their child's activities. However, as mentioned in the proviso, the extent to which these generally very positive responses reflect a response bias (e.g., certain parents being more likely to be aware returned completed surveys) or demand characteristics (responding to the "right" answer) is not clear.

Consistent trends were evident according to the grade levels of the children across the four school districts. As one would expect, parents of the middle school children reported higher levels of involvement in the child's activities and higher levels of awareness pertaining to their child's behavior than either the early high school or late high school parents. Typically, the parents of the early high school students reported less awareness and involvement compared to the parents of the middle school students and more awareness and involvement compared to parents of the late high school students. This appears to be consistent with children obtaining more independence from their parents as they mature. In a similar vein, the parents of late high school students indicated that they perceived less harm associated with alcohol use, compared to the parents of middle school and early high school students. While it is not clear why this is the case, it

may be speculated to be an example of the resolution of cognitive dissonance, or the changing of one's opinions to be more congruent with reality.

### **Parental Opinions Compared to Youth Reports**

The results of the parent survey were discrepant with several findings on the CTC Youth Survey. It is important to highlight that these data were obtained through different methods. Only 27% of the parent surveys that were mailed to a random sample of parents from the four school districts were returned, raising concerns about representativeness. However, it is important to highlight that this was a satisfactory return rate for mail-back questionnaires. In contrast, the CTC Youth Survey was administered to a random sample of students during class time and collected by teachers once completed. Hence, there was a higher return rate for the CTC Youth Survey compared the BCYPP Parent Survey. Also, the CTC Youth Survey asked each student to report about his or her own behavior, in contrast to parents, who were asked to reply to questions about another person. Furthermore, the CTC Youth Survey sample had more than three times the number of participants, with 3874 respondents, compared to the BCYPP Parent Survey sample. Even beyond these procedural differences, there were striking discrepancies between parental and student reports of student substance use that were evident and merit mention.

The differences between the reports of the parents and the reports of the students were of particular concern in reference to actual substance use. The aggregate student perspectives regarding substance use and other deviant behaviors as well as reported substance use are compared to the parent perspectives on Table 6 and Table 7. In terms of parent and child discrepancies across age groups, most of the middle school parents

(93%), early high school parents (70%) and late high school parents (49%) reported that their child had "Never" used alcohol. Similarly, most of the middle school parents (94%), early high school parents (83%) and late high school parents (76%) said that their child had never used tobacco. Finally nearly all of the middle school parents (98%), early high school parents (92%) and late high school parents (86%) said that their child had never tried other drugs. In sharp contrast to the parent reports, by the 7<sup>th</sup> grade, a substantial proportion of the students reported having tried alcohol (33%), tobacco (19%) and marijuana (4%). In addition, more than half of 9<sup>th</sup> grade students indicated that they had tried alcohol (62%), and many indicated having tried cigarettes (50%) or marijuana (36%). By 11<sup>th</sup> grade, 81% of students reported having tried alcohol, 61% reported trying cigarettes and almost half reported having tried marijuana (49%). The student survey results also found a substantial number of students reporting using alcohol within the 30 days prior to completing the CTC Youth Survey (approximately 10% of the 7<sup>th</sup> graders, 37% of the 9<sup>th</sup> graders and 50% of the 11<sup>th</sup> graders).

Nearly 78% of the parents across grade levels indicated that they would probably know whether their child used alcohol without their permission. However the results of the CTC survey revealed reports by 20% of the Broome County students of at least one episode of binge drinking (i.e., >5 drinks on one occasion) within the past two weeks. Furthermore, 38% of the 12<sup>th</sup> graders reported a binge-drinking episode within the past two weeks and nearly 19% of the students who completed the CTC Youth Survey reported having been drunk or high in the past year at school, ranging from approximately 4% of the seventh graders to 32% of the twelfth graders. Although not tied to the parent survey questionnaire, nearly 9% of the 10<sup>th</sup> and 11<sup>th</sup> graders and nearly 11%

of the 12<sup>th</sup> graders reported selling drugs in the year prior to the CTC survey. These results suggest that the parents have either underreported or are not as aware of their child's substance use as they had indicated.

#### Conclusions

There are several important trends to note in the context of the Communities That Care® (CTC) Youth Survey and the Broome County Youth Prevention Partnership (BCYPP) Parent Survey. First of all, parent reports were strongly against substance use, and indicated high levels of awareness of and involvement in their child's activities. This may reflect a response bias. It is plausible that the parents who returned completed forms are the parents who truly oppose substance use and who are involved in their child's activities. Secondly, the parents of older children reported less awareness and involvement compared to the parents of younger children. The greater number of children who reported substance use at higher grade levels may reflect less parent awareness and involvement. Finally, the parents may have underestimated the extent or likelihood of their child's substance use. The results of the CTC Youth Survey suggested that more students were involved in substance use than the parent report indicated. Whether the discrepancy between the student survey and the parent survey reflects that the parents are not as aware as they perceive to be or that there was a response bias in the parent sample is not clear; it is impossible to tease out the various forms of influence that these different variables may have.

However, the trend for late high school students to be more likely to use the substances in question compared to the early high school and middle school students was

evident in both the student and parent reports. Accordingly, these results suggest that parents should be informed and encouraged to maintain their involvement in their child's activities through high school as opposed to decreasing their involvement. Further, given increased peer use with age, as indicated by the CTC Youth Survey, and the relative weight of peer influence, as indicated by the BCYPP Youth Focus Group Report, programs to improve parent involvement might be offered.

#### **Parent Surveys: School Districts**

#### Binghamton City

Individuals who completed the survey from the Binghamton City School District were primarily parents (96%), although both legal guardians (3%) and grandparents (1%) also responded. Demographically, the large majority reported their child as White (88%), although smaller groups were also represented, including African-American (3%), Hispanic (2%), and Native American (2%), Asian/Pacific Islander (1%) and Other (4%), which included biracial, Haitian, and white Iranian. Ethnic variation was also evident in the reported primary household language, again dominated by English (96%) but including Russian (2%), Bosnian (1%), and Spanish (1%). In terms of the children's reported grades, the largest number of parents reported between 90-100 (40%), followed by 80-89 (30%) and 70-79 (22%), and finally 65-69 (6%). (See Table 33) The children being described in the Binghamton School District were, on average, 15 years old.

In terms of the reported acceptable age of substance use, the aggregate trend was highly evident. The large majority of parents in the Binghamton City School District simply opposed the use of drugs other than alcohol for their children (tobacco, 88%; marijuana, 94%; and "other drugs", 99%). However, there was less opposition in parents'

responses regarding alcohol use, inferred from their broader distribution across the spectrum of answers. For example, 28% reported that their child should "Never" drink alcohol, and 59% reported that it was acceptable for their child to drink at age 21. An additional 7% and 6% reported that alcohol use was acceptable "Before 21, If Being Taught Responsible Use" and "Before 21, With Adult Supervision" respectively. Finally, less than 1% reported that alcohol use was acceptable for their child prior to age 21. (See Table 34)

A similar pattern was evident in terms of parental perception of risk for harm associated with the use of substances. Alcohol was rated as a "Great Risk" for harm in individuals under 21-years of age by 68% of parents; marijuana received the same rating in 79% of parents; tobacco, 83%; and "other drugs", 95%. In addition, the majority of the rest of the responding was accounted for by the next highest risk attribution of "Moderate Risk" in each case. Very few parents (1%) for each category (alcohol, tobacco, marijuana and "other drugs") endorsed that there was "No Risk". Overall, parents indicated a perception of risk for harm associated with substance use behavior. (See Table 35)

In terms of knowledge of a child's behavior, parents tended to report that they would be likely to know if their child engaged in certain deviant or delinquent behaviors. Specifically, 93% of parents reported that they would either "Most Likely" or "Definitely" know if their child did not come home on time. Likewise, 80% reported the same probability of knowing if their child carried a handgun; 77%, if their child skipped school; and 76%, if their child drank alcohol without their permission. Despite these strong majorities, the remaining parents did report that it was only "Somewhat Likely" or "Not Likely" that they would know about these behaviors. This was particularly evident

for whether a child carried a handgun, in which 14% of parents reported it was "Not Likely" that they would know if this were the case and a further 5% reported that it was only "Somewhat Likely". (See Table 36)

The majority of parental responses in terms of general family dynamics and parent-child interactions tended to be positive. Eighty-eight percent of the parents reported that they "Usually" or "Always" ask their child what they think before making a decision that will affect him/her. Over 90% reported they "Usually" or "Always" tell their child that they are proud of him/her, ask their child about his/her homework, and know where their child is when he/she is not home. In addition, over 90% reported that they only "Occasionally" or "Never" have serious arguments, insult/yell at each other, or argue about the same issues over and over. Less clearly divided were the responses to whether the child attends a religious service or activity in which 27% answered either "Usually" or "Always", 31% answered "Occasionally" and 16% answered "Never". This was also the case for whether the parent attends a recreational activity at school or in the community with the child; 45% reported "Always", 29% "Usually", 22% "Occasionally" and 3% reported "Never". Nonetheless, despite these more varied patterns, the overall responding reflected positive parenting and family dynamics. (See Table 37)

In terms of parental value judgments of substance use and deviant behavior, the general responses tended to strongly reflect adaptive and positive family values. The large majority of parents deemed all examples of deviant behavior "Very Wrong" ranging from 98% for stealing anything worth more than \$5 to 86% for picking a fight with someone. Other examples in-between included drinking alcohol, smoking cigarettes or marijuana, or drawing graffiti. Further, many of the other responses fell in the category

of "Wrong", with less than 1% of parents suggesting any of the deviant behaviors were "Not Wrong". (See Table 38)

Finally, parent perceptions of actual child usage tended to be positive. Parents tended to respond that their child either "Never" or only "Once or Twice" used substances. In the case of alcohol, these responses were reported by 88% of the parents; for tobacco, 90%; and for 'other drugs'', 97%. (See Table 39) Equally, parents who responded generally did not perceive any substance use to be a problem. Specifically, most of parents reported that their child did not have a problem with alcohol use (94%), tobacco use (91%) or "other drug" use (93%). The rest of the parents were relatively evenly divided between endorsing problem behavior and "Don't Know". Thirty-six percent did describe someone in their family who has had a severe alcohol or drug problem. (See table 40)

#### Johnson City

As with the aggregate findings, in the Johnson City School District the respondents were primarily parents (98%) and grandparents (2%). The majority of the parents reported that their child's ethnicity was White (94%), however other ethnicities were reported for some of the children, including, Native American (1%), Asian/Pacific Islander (3%) and Other (2%). Most of the parents indicated that the primary language spoken at home was English (98%), with small proportions reporting Russian (1%), and Vietnamese (1%). The average age of the children, similar to the reports from the

Binghamton School District was fifteen. Nearly all of the parents who responded to the survey reported that their child's grades were high. Specifically the reports of child grade performance fell into the following ranges: 90-100 (52%), 80-89 (33%), 70-79 (13%), 65-69 (2%), and below 65 (1%). (See Table 41)

In terms of parents' attitudes towards substance use by their child, most Johnson City parents (84%) indicated that they were opposed to substance use prior to age 21. In accordance with the larger aggregate trend, however, these responses indicated a broader array of answers for alcohol than for other drugs. Nearly 60% of the parents reported that it would be acceptable for their child to drink alcohol "At age 21" and 24% indicated that their child should "Never" drink alcohol. Fewer parents endorsed that it was acceptable for their child to drink before age 21, in "Supervised" (10%) or "Responsible" (5%) use. (See Table 42)

In regard to substance use other than alcohol, parental attitudes were clearly less permissive: most Johnson City parents responded there was no acceptable age for use (tobacco, 87%; marijuana, 98%; and "other drugs", 99%). Although 8% of parents responded that tobacco was acceptable at age 21 and 2% said the same about marijuana, overall, parents strongly indicated that they were opposed to their child using any substances other than alcohol and most parents were opposed to alcohol use prior to age 21. (See Table 42)

Likewise, most parents perceived that there would be a risk for harm associated with substance use. Specifically, most parents (78%) perceived that alcohol use had a "Great Risk" for harm in individuals under 21-years of age, while 18% of the parents endorsed "Moderate" risk for harm. Moreover, marijuana use, tobacco use and other

drug use were rated as a "Great Risk" for harm by 81%, 89%, and 97% of the parents, respectively. Very few parents (1%) responded that there was "No Risk" for alcohol and marijuana use, and none of the parents reported that they perceived "No Risk" associated with tobacco and other substance use. Similarly, few parents endorsed only a 'Slight Risk" for harm being associated with tobacco (2%), marijuana (3%), alcohol (3%) use or other substance use (1%). Overall, Johnson City parents reported knowledge of a risk for harm associated with substance use in children. (See Table 43)

Similar to the parents in the other school districts, parents from Johnson City reported high levels of awareness of their children's behavior. A great majority of the parents reported that they would either "Definitely" or "Most Likely" know whether their child engaged in deviant or delinquent behavior related to substance use and truancy. For example, 96% of parents reported that they would either "Most Likely" or "Definitely" know whether their child came home on time. The same likelihood was reported by 84% of parents in reference to their child carrying a handgun, by 93% in terms of skipping school and by 82% of parents in terms of drinking alcohol without their permission. However, nearly 18% of the parents said that it was "Not Likely" or only "Somewhat Likely" that they would know whether their child drank alcohol and 17% of the parents indicated that it was "Not Likely" or "Somewhat Likely" that they would know whether their child carried a handgun. (See Table 44)

In terms of the extent to which parents were involved with their child's school and social activities, parents reported high levels of participation. For example, most parents (94%) indicated that they "Usually" or "Always" ask their child what they think before making a decision that will affect the child. Likewise, many parents (94%)

reported telling their child that they are proud of him or her. In terms of interest and involvement in their child's affairs, nearly all of the parents reported that they "Usually" or "Always" know where their child is when their child is not at home (98%), and that they ask their child to call when they will be late (>99%). Furthermore, 89% of parents reported regularly asking their child about his/her homework, and 85% reported frequently attending a recreational activity with their child. (See Table 45)

Most parents in Johnson City reported low levels of family discord, with over 98% of the parents endorsing that they "Never" or only "Occasionally" have serious arguments or insult/yell at each other (95%) and 92% indicated that they only "Occasionally" or "Never" continually argued about the same issues. Parental responses as to the frequency that their child attends a religious service or activity were more broadly distributed: 57% answered either "Usually" or "Always", 33% answered "Occasionally" and 10% answered "Never". Overall, parent responses reflected parents who are knowledgeable about and involved in their children's activities and positive family interactions. (See Table 45)

Consistent with previous endorsement of being involved with their child and positive family dynamics, Johnson City parents' responses suggested that they held strong beliefs and values in regards to deviant behaviors. Nearly all of the parents reported viewing that it would be "Very Wrong" for their child to engage in deviant behavior including drinking alcohol regularly (94%); smoking cigarettes (92%), and smoking marijuana (96%). Parental values also reflected a strong moral sense, the majority regarding as "Very Wrong" stealing anything worth more than \$5 (98%), picking a fight with someone (87%) and drawing graffiti (97%). All of the parents

endorsed that the regular use of alcohol, tobacco or marijuana is at least "Somewhat Wrong". (See Table 46)

Parental responses pertaining to their child's substance usage were by and large positive. For example most parents endorsed that their children either "Never" or only "Once or Twice" had used substances. Specifically, 93% of the parents for alcohol, 94% for tobacco, and 99% for "other drugs" reported these responses. (See Table 47) Consistent with these reports, parents also indicated that their child did not have a problem with any kind of substance use. Specifically, over 95% described their child's use of alcohol, tobacco, or "other drugs" as not a problem. Two percent of the parents responded that they did not know whether their child had a substance use problem for alcohol and/or drugs. In terms of family history of substance use problems, 34% parents reported that someone in their family had a severe alcohol or drug problem. (See Table 48)

The parent survey responses from Johnson City School District indicated that, for the most part, the parents held strong beliefs and values in opposition to substance use by their child. Furthermore, the parents reported maintaining high levels of involvement with their child and relatively high levels of awareness in regards to the extent to which their child would engage in deviant behavior. A much smaller percentage of the parents reported that they were not opposed to substance use prior to adulthood and likewise relatively few indicated that they would not be aware of their child's behavior or that they were not especially involved in their child's activities.

#### Maine-Endwell Central School District

Individuals who completed the survey from Maine-Endwell were primarily parents (98%) although surveys were also completed by grandparents (1%) and legal guardians (<1%). Demographically, the large majority reported themselves as White (95%), but the following groups were also represented: African-American (1%), Native American (1%), Asian/Pacific Islander (2%) and Other (1%). In terms of the reported grades, the largest proportion reported high grades for their child, between 90-100 (42%), followed by the range from 80-89 (35%), 70-79 (17%), 65-69 (4%), and below 65 (2%). (See Table 49) The children's age averaged just over fifteen years old.

The aggregate trend of increased acceptance of alcohol use at age 21 or prior to age 21 under certain circumstances compared to other substance use was supported in Maine-Endwell. Specifically, only 23% reported that their child should "Never" drink alcohol whereas 66% reported that it was acceptable for their child to drink "At age 21". A small but nonetheless identifiable group endorsed either "Supervised" or "Responsible" use of alcohol prior to age 21 (4% and 7%, respectively). Less than 1% of parents reported alcohol use in general was acceptable for their child prior to age 21. (See Table 50)

However a greater percentage of the parents indicated that tobacco, marijuana, or "other drugs" use was not acceptable for their child. Specifically, the large majority of parents responded there was no acceptable age for use (tobacco, 93%; marijuana, 96%; and "other drugs", 99%). While 6% of parents responded that tobacco was acceptable at

age 21 and 2% said the same about marijuana, the overall opinions were strongly against any substance beside alcohol. (See Table 50)

In Maine-Endwell, parents clearly perceived risk for harm from substance use. Alcohol was rated as a "Great" risk for harm in individuals under 21-years of age by 68% of the parents. Marijuana received the same risk rating by 79% of the parents, tobacco by 91%, and "other drugs", by 97%. In addition, the majority of the rest of the responses was accounted for by the next highest risk attribution of "Moderate" for each substance other than alcohol. Only 1% of parents responded that there was "No Risk" for both tobacco and marijuana and no parents responded that there was "No Risk" for alcohol or "other drugs". Overall, parents indicated that they perceived of risk for harm associated with substance use behavior. (See Table 51)

Parents broadly endorsed that they would be likely to know if their child engaged in the deviant or delinquent behaviors assessed. Ninety-four percent of the parents reported that they would either "Most Likely" or "Definitely" know if their child did not come home on time. Similarly, the same likelihood was reported by 82% of parents as to whether their child carried a hand gun, by 85% in terms of skipping school and by 76% of parents in reference to drinking alcohol without their permission. Despite these majorities, the rest of parents did report that it was only "Somewhat Likely" or "Not Likely" that they would know about these behaviors which was particularly evident for whether a child drank alcohol without their permission (23%), carried a handgun (18%), or skipped school (14%). (See Table 52)

The majority of parental responses in relation to parent-child interactions or family dynamics tended to be positive. For example, 91% of parents reported that they

"Usually" or "Always" ask their child what their child thinks before making a decision that will affect him or her. Moreover, 96% of the parents endorsed that they "Usually" or "Always" tell their child that they are proud of him/her. In addition, over 95% of parents reported they "Usually" or "Always" know where they are when they are not home and ask them to call when they will be late. For the same categories 88% of parents reported asking their child about his/her homework at least "Usually", and 80% report attending a recreational activity with their child. From the perspective of familial discord, over 95% reported that they only "Occasionally" or "Never" have serious arguments or insult/yell at each other, and that same frequency was reported by 87% regarding arguing about the same issues over and over. Similar to the other school districts, the responses to whether the child attends a religious service or activity were broadly distributed: 54% answered either "Usually" or "Always", 32% answered "Occasionally" and 13% answered "Never". Nevertheless, the overall responding reflected positive parenting and family dynamics. (See Table 53)

In terms of parental judgments of substance use and deviant behavior, their responses strongly reflected adaptive and positive family values. The large majority of parents deemed all examples of deviant behavior "Very Wrong" ranging from 99% for the behavior of stealing anything worth more than \$5 to 80% for picking a fight with someone and including drinking alcohol, smoking cigarettes or marijuana, or drawing graffiti. Moreover, almost all other responses fell in the category of "Wrong". For example, in the case of fighting, the maladaptive behavior with the lowest number of "Very Wrong" attributions (80%), 19% of parents reported fighting was "Wrong", accounting for 99% of parental response between "Wrong" and "Very Wrong", the two

top categories. Finally, no parents suggested any of the deviant behaviors were "Not Wrong". (See Table 54)

Maine-Endwell perceptions of child usage and problems associated with substance use were generally positive. In the first case, parents tended to respond that their children either "Never" or only "Once or twice" had used substances. For alcohol, these responses were reported by 93% of the parents, for tobacco, 97% of parents, and for "other drugs", by 97% of parents. (See Table 55) Equally, parents who responded did not perceive any substance use to be a problem. Specifically, 97% of parents described their child's alcohol use as not a problem, 96% described tobacco use as not a problem and 97% described "other drug" use as not a problem, with the tiny remaining proportion evenly divided between endorsing problem behavior and "Don't Know". Finally, 25% described someone in their family having had a severe alcohol or drug problem. (See Table 56)

#### Union-Endicott Central School District

Similar to the other school districts, most of the respondents to the parent survey from the Union-Endicott School District were parents (99%), although grandparents (<1%) and legal guardians (1%) also responded. Nearly all of the parents reported their child's ethnicity as White (94%). There was a very small representation of parents that reported their child's other ethnicity as Hispanic (1%), Native American (2%), Asian/Pacific Islander (1%) or 2% Other. In terms of their child's academic standing, the parents reported that their child's grades were relatively high. Specific grade ranges included the following intervals from highest to lowest: between 90-100 (42%), 80-89

(37%), 70-79 (14%), 65-69 (5%), and below 65 (2%). (See Table 57) The average age of the children was approximately fifteen.

In terms of acceptability of substance use, the previously mentioned trend prevailed. Although most Union-Endicott parents (65%) reported that it would be acceptable for their child to drink alcohol at age 21, some endorsed that it was acceptable for their child to drink before age 21, in "Supervised" (10%) or "Responsible" (5%) use. However, 20% of the parents indicated that their child should "Never" drink alcohol. In terms of other substance use, parental attitudes were much less broadly distributed. The majority of the Union-Endicott parents responded there was no acceptable age for use (tobacco, 90%; marijuana, 96%; and "other drugs", 99%). However, 9% of the parents did respond that tobacco was acceptable at age 21 and 3% endorsed the same of marijuana. Generally however, nearly all of parents were opposed to their child using any drug beside alcohol, and most were opposed to alcohol use before age 21. (See Table 58)

In addition to endorsing opposition to substance use before age 21, most parents indicated on the following series of questions that they perceived a risk for harm associated with substance use. Specifically, most parents (68%) perceived that alcohol use was a "Great" risk for harm in individuals under 21-years of age, the majority of the remainder (28%) endorsed its "Moderate" risk for harm. Moreover, marijuana use, tobacco use and "other drug" use were rated as a "Great" risk for harm by 84%, 92%, and 98% of the parents, respectively. In addition, 12% of the parents endorsed that marijuana use and 8% endorsed that tobacco use as having "Moderate" risk for harm, the next highest category. None of the parents responded that there was "No Risk" for alcohol, tobacco, marijuana and "other drug" use. Similar to the other school districts, Union-

Endicott parents clearly indicated understanding of the risk for harm associated with substance use in children. (See Table 59)

In terms of the extent to which parents were confident that they would be aware of any delinquent or deviant behavior, most parents reported that they were highly aware of their child's behavior. The majority of parents reported that they would be likely to know if their child engaged in the deviant or delinquent behaviors assessed. Specifically, 96% of parents reported that they would either "Most Likely" or "Definitely" know if their child did not come home on time. The same likelihood was reported by 88% of parents regarding whether their child carried a handgun, by 89% in terms of skipping school and by 78% of parents in terms of drinking alcohol without their permission. Of particular interest, nearly 22% of the parents did report that it was only "Somewhat Likely" or "Not Likely" that they would know whether their child drank alcohol and 12% reported the same likelihood for knowing whether their child skipped school and 13% for knowing whether their child carried a handgun. (See Table 60)

Overall, parents in Union-Endicott reported generally positive parent-child interactions and high levels of involvement with their child. Most parents (91%) indicated that they "Usually" or "Always" ask their child what they think before making a decision that will affect the child. Nearly all of the parents (96%) reported at least usually telling their child that they are proud of him or her. In terms of interest and involvement in their child's affairs, the great majority of the parents (98%) reported that they "Usually" or "Always" know where their child is when the child is not at home and that they ask their child to call when they will be late. Furthermore, 95% of parents

reported asking their child about his/her homework, and 85% reported the same for attending a recreational activity with their child. (See Table 61)

Most of the parents reported low levels of family discord, with over 96% of the parents endorsing that they only "Occasionally" or "Never" have serious arguments or insult/yell at each other and 87% indicated that they only "Occasionally" or "Never" continually argued about the same issues. As before, parental responses as to the frequency that their child attends a religious service or activity were more evenly divided: 56% answered either "Usually" or "Always", 34% answered "Occasionally" and 10% answered "Never". Overall, the responses reflected parents who are knowledgeable about and involved in their children's activities and positive family dynamics. (See Table 61)

Consistent with reports of being involved with their child and positive family dynamics, parents indicated that they held strong beliefs and values in regards to deviant behaviors. Nearly all of the parents reported that it would be "Very Wrong" for their child to engage in deviant behavior, including drinking alcohol regularly (94%); smoking cigarettes (93%), smoking marijuana (94%), stealing anything worth more than \$5 (>99%), picking a fight with someone (88%) and drawing graffiti (97%). Furthermore, the majority of all other responses fell in the category of "Wrong". For example, while picking a fight had the lowest number of "Very Wrong" attributions, of those who did not select "Very Wrong", the large majority reported that picking a fight was "Wrong", the next judgment down. Less than 1% of the parents indicated that substance use of any kind (i.e., alcohol, tobacco or marijuana) was "Not Wrong". (See Table 62)

Finally, in terms of child substance usage, the majority of parents endorsed that their children either "Never" or only "Once or twice" had used substances. Specifically,

these responses were reported by 94% of the parents for alcohol, for tobacco, 94% of parents, and for "Other drugs", by 99% of parents. (See Table 63) As expected from these reports, parents for the most part indicated that they did not perceive any substance use to be a problem. In particular, 97% of parents described their child's alcohol use as not a problem, whereas 93% described tobacco use as not a problem and 98% described "Other drug" use as not a problem. Very few parents (5%) reported that their child had a problem with alcohol use and less than 1% of the parents endorsing that they did not know whether their child had a substance use problem for alcohol and/or drugs. In terms of family history of substance use problems, 29% of the parents reported that someone in their family had a severe alcohol or drug problem. (See Table 64)

Similar to other school districts, the surveys from the Union-Endicott Central School District indicated a relatively high level of parental involvement in the child's school and social activities, strong values opposed to substance use other than alcohol and opposition to alcohol use prior to 21-years of age. Interestingly, more parents thought that their child should "never" use tobacco products, although most were not opposed to use of alcohol in adulthood.

#### **General Conclusions**

Overall the data from each school district were relatively similar from district to district, and highly consistent with the aggregate data across all four school districts. Parents from each school district reported strong opposition to the use of substances prior to age 21, as did they indicate a knowledge of a risk of harm associated with substance use. They also reported high levels of involvement with their child and awareness of their child's activities. Moreover, most parents endorsed that their child did not have a

problem with substance use. Several overall conclusions can be reached based on the trends evident within both the aggregate data and individual school districts in conjunction with the data from the CTC Youth Survey.

In the same fashion as the aggregate findings, parental estimations of child substance use appear to be discordant with the student self-reports of substance use: students report that a greater proportion have tried or use alcohol, tobacco, marijuana or other substances use or experimentation than parents indicate. Although the CTC Youth Survey did not provide district-specific reports, the parent-student discrepancy on the county level was so large as to reasonably infer that it is the same on a district level.

Upon review, these discrepancies suggest that parents in Broome County do not complete awareness what their children are doing. Nevertheless, as emphasized in prior sections of this report, these results should be interpreted with caution. Compared to the student sample, there were fewer respondents to the parent survey, implying the possibility of parental response bias. That is, the parents who returned the survey may be more involved in and aware of their child's activities. These parents (27% of the random sample) may not represent Broome County parents at large, whereas the student sample may better correspond to the overall adolescent and preadolescent population of the four school districts. It is also possible that the parents are not as highly aware of their child's activities as they reported or that they have minimized the extent to which their child may be involved in substance use. Other possibilities include that parents responded more optimistically since they were speculating about the behavior of another, in contrast to student definitive self-reports; or that parents simply endorsed the "correct" or "right" opinion that substance use and related behaviors are bad, a response bias known as

"social desirability". Indeed, with all these potential ways to interpret this discrepancy, there is no straightforward methodological or statistical procedure to definitively support any single one.

Despite these divergent reports and an inability to assess the sources of discrepancy, the reports of the parents and students were also similar in a very telling way. Parent responses and student responses showed a consistent trend across grade levels. The parent surveys suggested that the parents of late high school students compared to early high school students and middle school students were less involved, less aware and more permissive. Parental attitudes towards substance use, especially alcohol, were more lenient for the children at an older age and the perceived risk associated with alcohol use decreased as grade level increased. Likewise, parents were more confident that they would know whether their child used alcohol and other substances without their permission and whether their child engaged in delinquent or truant behaviors at the middle school level compared to the early high school and late high school levels. Parents of older children reported that a greater percentage of their children had used alcohol, tobacco and marijuana and were more permissive in their perspective on usage, especially in the case of alcohol.

Similar to the pattern of parental response, the CTC Youth Survey indicated that more of the 11<sup>th</sup> and 12<sup>th</sup> grade high school students were reporting having tried any of these substances compared to the students at lower grade levels. Furthermore, more of the older students reported having used these substances from at least once to several times in the two weeks or month prior to completing the survey and this trend is true also for 10th graders compared to 9<sup>th</sup> graders, 9th graders compared to 8<sup>th</sup> and so on. The only

substances that the youngest students, the seventh graders, had used in greater proportion compared to the older students were inhalants (by only a negligible margin).

Unifying these parallel trends, these data suggest that substance experimentation and use increase with age and may be influenced by a decrease in parental involvement and awareness of their child's activities, as well as by an increase in permissiveness related to substance use. This latter case is most prominently seen in terms of alcohol use. More of the middle school parents were more opposed to alcohol, tobacco, marijuana or "other" drug use compared to early high school and late high school parents. Further, middle school parents perceived greater risk involved with substance use and reported both being more involved in their child's life and aware of their child's activities than either group of high school parents. This change in the complexion of parental attitudes across adolescence is the more prominent than either aggregate trends or characteristics of specific districts.

The results of the BCYPP Parent Survey, in conjunction with the two methods of student report, depict the students and parents of Broome County in relatively normative terms: substance experimentation and use increase with age, peer pressure and parental values play significant roles, and parental attitudes and awareness, while prevailingly positive, tend to become more lax as the child ages. While not unusual, dynamics such as this have been described in the research Iterature as potentially important variables in reference to adolescent substance use (Windle & Davies, 1999). As such, these data suggest that in addition to teen-specific interventions to reduce substance abuse in Broome County, preventive interventions focusing on improving parenting perceptions and skills may be of value. In particular, programming that includes publicizing the

results of the CTC Survey, providing interventions across the adolescent developmental lifespan, and enhance the ability of parents to be actively involved in their child's life throughout high school could be significant.

#### References

Developmental Research Programs, Inc. (2001) *Communities That Care*® *Youth Survey Report*. Report prepared for Broome County Youth Prevention Partnership.

MacKillop, J., Cochran, M., Ryabchenko, K., Lisman, S. A. (2001) *Youth Focus Group Report*. Prepared for the Broome County Youth Prevention Partnership.

Ryabchenko, K., MacKillop, J., & Lisman, S. A. (2001) *Information Specialist Team CTC® Youth Survey Report Data Validation*. Prepared for the Broome County Youth Prevention Partnership.

Saratoga Partnership for Prevention: Status Report (2001, February).

Windle, M. & Davies, P.T. (1999). Developmental theory and research. In K.E. Leonard, and H. T. Blane, *Psychological Theories of Drinking and Alcoholism*, (2<sup>nd</sup> ed. pp164-203). New York: Guilford Press.

# **Appendix A: Statistical Power Analysis**

# **Question:**

How many surveys would we need <u>returned</u> to analyze by school district, by grade, or by both?

## **Assumptions:**

Adequate power = .80

 $\alpha = .05$ 

Small effect size  $(\eta)$  between school districts and grades

## **Analysis by DISTRICT:**

(df = 3; degrees of freedom on 4 school districts = 3)

- For  $\eta = .05$ , n = 1086/District [181/grade/district; 4344 total]
- For  $\eta = .10$ , n = 274/District [46/grade/district; 1104 total]

# **Analysis by GRADE:**

(df = 5; degrees of freedom on 6 grades = 5)

• For  $\eta = .05$ , n = 856/Grade total]

[214/grade/district; 5136

For  $\eta = .10$ , n = 215/Grade

[54/grade/district; 1296 total]

# **Analysis by GRADE & DISTRICT:**

(df = 23; degrees of freedom on 6 grades in 4 districts = 23)

- For  $\eta = .05$ , n = 363/Grade/District [8712 total]
- For  $\eta = .10$ , n = 91/Grade/District [2184 total]

# **Appendix B: Parent Survey**

BROOME COUNTY YOUTH PREVENTION PARTNERSHIP State Incentive Cooperative Agreement (SICA) Project

School District					
Instructions: Please fill out the questions below for your	child in the _	grade			
Date:/					
Age of child in 6 <sup>th</sup> grade:					
Your relationship to child:					
Parent Grandparent Guardian					
Child's grades (during current year: September 2000 – Ju	ane 2001):				
Mostly 90-100 Mostly 80-89	Mostly 70-7	91	Mostly 65-69	Mostly l	elow
65					
Child's ethnicity:					
Caucasian Asian /	Pacific Island	ler l	Native American	ı	
African American Hispanic		Other:			
		(pl	ease list)		
Please answer the following questions by checking the	appropriate	box:			
	Never	When They Are 21	Before 21 With Adult Supervision	Before 21 If Being Taught Responsible Use	Before 21
1. When do you think it is acceptable for your child to use <u>alcohol</u> ?					
2. When do you think it is acceptable for your child to use <u>tobacco</u> ?					
3. When do you think it is acceptable for your child to use <u>marijuana</u> ?					
4. When do you think it is acceptable for your child to use <u>other drugs</u> ?					
		No Risk	Slight Risk	Moderate Risk	Great Risk
5. How much do you think people under 21 risk harming if they <u>smoke cigarettes</u> ?	themselves				
6. How much do you think people under 21 risk harming if they smoke marijuana?	thems elves				

7. How much do you think people under 21 risk harming themselves		_		
if they <u>drink beer, wine, or hard liquor</u> ?				
8. How much do you think people under 21 risk harming themselves if they <u>use illegal drugs or take drugs when they are not sick?</u>				
	Not likely	Somewhat Likely	Most likely	Definitely
9. If your child <u>drank alcohol</u> without your permission, how likely is it that you would know?				
10. If your child <u>skipped school</u> , how likely is it that you would know?				
11. If your child <u>carried a handgun without your permission</u> , how likely is it that you would know?				
12. If your child <u>did not come home on time</u> , how likely is it that you would know?				
	Never	Occasionally	Usually	Always
13. How often do you ask your child what he/she thinks before making decisions that affect him/her?				
14. How often do you tell your child you are proud of them for something they have done?				
15. How often does your child attend a religious service or activity?				
16. How often do you ask your child if he/she has done his homework?				
17. How often do you ask your child to call you if he/she is going to be late?				
18. How often do you attend a recreational activity with your child at school or in the community?				
19. If your child is not at home, how often do you know where he/she is?				
20. How often do members of your family have serious arguments?				
21. How often do members of your family insult or yell at each other?				
22. How often do members of your family fight about the same issues over and over again?				
	Very Wrong	Wrong	A Little Wrong	Not Wrong
23. How wrong do you feel it would be for your child to <u>drink alcohol</u> <u>regularly</u> ?				
24. How wrong do you think it would be for your child to smoke cigarettes?				

25. How wrong do you think it would be for your child to smoke marijuana?				
26. How wrong do you think it would be for your child to <u>steal anything</u> worth more than \$5?				
27. How wrong do you think it would be for your child to <u>pick a fight</u> with someone?				
28. How wrong do you think it would be for your child to <u>draw</u> graffiti on buildings or property without the owner's permission?				
<ul> <li>29. How would you describe your child's <u>alcohol</u> use?</li> <li>30. How would you describe your child's <u>tobacco</u> use?</li> <li>31. How would you describe your child's <u>other drug</u> use?</li> </ul>	Never Uses	Used Once or Twice	Uses Occasionally	Uses Frequently
<ul> <li>32. Is your child's <u>alcohol</u> use a problem?</li> <li>33. Is your child's <u>tobacco</u> use a problem?</li> <li>34. Is your child's <u>other drug</u> use a problem?</li> <li>35. Has anyone in your family ever had a severe <u>alcohol or drug</u> problem?</li> </ul>	n?	Yes	No  □  □  □	Don't Know
Do you have any additional comments?				
Do you have any additional comments?				

### PLEASE RETURN SURVEY BY JUNE 15, 2001

A return-addressed stamped envelope has been provided to you. If you do not use the provided envelope, the address is included below.

Attention: Terry Cole, Project Coordinator
Broome County Mental Health Department – SICA
One Hawley Street
Binghamton, NY 13901

Please feel free to contact Terry Cole with any questions at 607-778-1162.